

PATENT

Attorney Docket: 2517 Div2Con (203-3449 Div3Con)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Helmut Kayan et al. EXAMINER: Vi X. Nguyen
SERIAL NO.: 10/751,579 ART UNIT: 3734
FILED: January 5, 2004 DATED: March 12, 2008
FOR: METHOD FOR BLOOD VESSEL CLIP APPLICATION

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	8	MINUS 20	= 0	X 25 \$	X 50 \$ 0.00
INDEP.	1	MINUS 3	= 0	X 105 \$	X 210 \$ 0.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				X 185 \$	X 370 \$ 0.00
				TOTAL	OR TOTAL \$ 0.00
				ADDIT. FEE	\$ 0.00

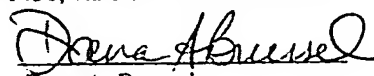
No additional fee is required.

- * If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.
 - ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
 - *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being transmitted on the date below with the United States Patent and Trademark Office, PO Box 1450, Alexandria, VA 22313-1450, via electronic submission.

Dated: March 12, 2008


Dana A. Brussel

- [] Please charge Deposit Account No. 21-0550 in the amount of \$_____. Two (2) copies of this sheet are enclosed.
- [] A check in the amount of \$_____ is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No.21-0550 Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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